FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

87 APR 23 PM 12:48

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

H39242 3
SUN-BELT RESTAURANTS, INC.
% LEWIS ANSBACHER
4215 SOUTHPOINT BLVD., SUITE 100
JACKSONVILLE, FL 32216

If above address is incorrect in any way, enter the correct address in item 2 Include Zip Code

2 Enter Change of Address of Corporation Principal Office P O Box Number Alone is NOT Sufficient

Street Address 21

P O Box No 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 01/22/1985

4 Federal Employer Identification Number (FEIN): 35-1638375

5 Date of Last Report: 06/09/1986

6 Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
COLLINS, ALAN R.	D/P	1435 N. MICHIGAN ST.	PLYMOUTH, IN.
ECK, CHARLES	D/S/T	1435 N. MICHIGAN ST.	PLYMOUTH, IN.
[illegible]	[illegible]	[illegible]	[illegible]
PETERSEN, CATHY	AS	6593-23 POWERS AVENUE	JACKSONVILLE, FL
TRINE, THOMAS	VP	6593-23 POWERS AVENUE	JACKSONVILLE, FL

000002402740—1

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

ANSBACHER, LEWIS
4215 SOUTHPOINT BLVD.
SUITE 100
JACKSONVILLE, FL 32216

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P O Box Number) 82

Street Address 2 (Do NOT Use P O Box Number) 83

City and State 84: FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607 034 and 607 037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of, Section 607 325 F S

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

CR2E034 (1/86)

10 *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F S
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature: Thomas N. Trine — Date: 4/2/87

Typed Name of Signing Officer: Thomas N. Trine — Title: Vice President — Telephone Number: 739-2049

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status